STATEMENT OF CANDIDACY

(a) Name of Candidate (in full)						
Jane Doe b) Address (number and street) □ Check if address changed 626 Pritham Ave.		2. Identification Number To be assigned				
Springfield, VA	00000 (c) City, State, and Z	IP Code	3. Is This Statement	New Y (N)	OR	Amended (A)
Party Affiliation IND	5. Office Sought U.S. House	6. State & Distr	rict of Candidate	Α ` ΄		. ,
	ESIGNATION OF PRING		=	F		
I hereby designate the following n			2	004	election(s).	
			(yea	r of election)	cicciion(3).	
NOTE: This designation should be	e filed with the appropriate office I	isted in the instructions.				
(a) Name of Committee (in full)						
Doe for Congress						
(b) Address (number and street)						
210 Main Street						
319 Main Street (c) City, State, and ZIP Code						
Springfield, VA	00000					
ט	ESIGNATION OF OTHE	RAUTHORIZED		-5		
	(Including Joint Fo	undraising Representative		and expend	funds on be	ehalf of my
I hereby authorize the following na candidacy. NOTE: This designation should be (a) Name of Committee (in full) Friends of Jane Do	(Including Joint Fu	undraising Representative		and expend	funds on be	ehalf of my
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I hereby authorize the following na candidacy. NOTE: This designation should be a candidacy. (a) Name of Committee (in full) Friends of Jane Do (b) Address (number and street) 147 Felicity Circle	(Including Joint Fu	undraising Representative		and expend	funds on be	ehalf of my
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